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23rd September 2020 Deputy Dail Eireann, Kildare St., Dublin 2.

Dear Deputy Naughten,

The Health Service Executive has been requested to reply directly to your Parliamentary Question below which you submitted to the Minister for Health for response.

PQ 23191/20; To ask the Minister for Health his plans to roll out the Sligo model of eye care; the reason for the delay; if alternatives to this model are being considered; and if he will make a statement on the matter. - Denis Naughten

The PCESRG Report was launched in June 2017. The Report sets out current levels of service, models of service provision and the consultation process undertaken with patients, advocates, ophthalmic staff and representative bodies. It also highlights the limitations of the current model of service delivery and sets out the way forward for a significant amount of eye services to be delivered in a primary care setting. The Report estimates that 60% of existing outpatient activity including AMD care could be moved to primary care thus enabling hospital services to focus on patients who require more specialist diagnostics or treatments. The National Clinical Programme for Ophthalmology has developed a model of care which details how the realignment of eye services from the acute hospitals to the community will be undertaken. The recommendations from the PCESRG Report also complement the Model of Care.

The Primary Care Eye Services Review Group Report remains current and the HSE is implementing the following:

- Establishing adult and paediatric primary care eye teams in CHOs 6 and 7.
- Establishing an adult primary care eye team and expanding the paediatric primary care eye team in CHO
 9.
- Equipped CHOs 6, 7 & 9 to support their new and/or expanded primary care eye teams.
- Completing a proposal to transfer the care of children aged 8+years to the care of local private optometrists; it is proposed that this will roll out to all CHOs in 2021 subject to funding approval.
- Creating a new role of Consultant Medical Ophthalmologist, subject to DPER approval.
- Successfully recruited 1.0 WTE Consultant Medical Ophthalmologist per CHO 6, 7 and 9 to oversee clinical governance in the areas. There is a panel in place to recruit additional Consultant Medical Ophthalmologists to other CHOs and this will be rolled out in line with funding approval.



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The priority for the HSE is to support the Primary Care Eye Teams in CHOs 6, 7 and 9 to be working to their maximum in 2021 and to then rollout this team model to other CHOs. Staff working within the adult primary care eye teams will manage patients with cataract and other eye conditions to reduce hospital waiting lists. Overtime, some of this work may transition to the local community optometrists, similar to the Sligo model.

Yours sincerely,

Geraldine Crowley,

Assistant National Director,

Primary Care Strategy and Planning